

## **Application Data Sheet**

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification:: 220/505  
Suggested Group Art Unit::  
CD-ROM or CD-R? None  
Title:: Pail Assembly for Two Materials

Attorney Docket Number:: MAPEI 00002  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity:: No  
Petition included?: No  
Secrecy Order in Parent Appl.?: No

**Applicant Information**

**Applicant Authority type::** Inventor  
**Primary Citizenship Country:** US  
**Status::** Full Capacity  
**Given Name::** Donald  
**Middle Name::**  
**Family Name::** House  
**City of Residence::** Coral Springs  
**State or Province of Residence::** FL  
**Country of Residence::** US  
**Street of mailing address::** \_\_\_\_\_  
\_\_\_\_\_  
**City of mailing address::** \_\_\_\_\_  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** \_\_\_\_\_

**Applicant Information**

**Applicant Authority type::** Inventor  
**Primary Citizenship Country:** US  
**Status::** Full Capacity  
**Given Name::** Tracy  
**Middle Name::**  
**Family Name::** Oliver  
**City of Residence::** Boynton Beach  
**State or Province of Residence::** FL  
**Country of Residence::** US  
**Street of mailing address::** \_\_\_\_\_  
\_\_\_\_\_  
**City of mailing address::** \_\_\_\_\_  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** \_\_\_\_\_

**Applicant Information**

**Applicant Authority type::** Inventor  
**Primary Citizenship Country:** US  
**Status::** Full Capacity  
**Given Name::** Lou  
**Middle Name::**  
**Family Name::** Bender  
**City of Residence::** Deerfield Beach  
**State or Province of Residence::** FL  
**Country of Residence::** US  
**Street of mailing address::** \_\_\_\_\_  
\_\_\_\_\_  
**City of mailing address::** \_\_\_\_\_  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** \_\_\_\_\_

**Applicant Information**

**Applicant Authority type::** Inventor  
**Primary Citizenship Country:** US  
**Status::** Full Capacity  
**Given Name::** Steve  
**Middle Name::**  
**Family Name::** Daniels  
**City of Residence::** Pembroke Pines  
**State or Province of Residence::** FL  
**Country of Residence::** US  
**Street of mailing address::** \_\_\_\_\_  
\_\_\_\_\_  
**City of mailing address::** \_\_\_\_\_  
**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** \_\_\_\_\_

### **Correspondence Information**

Name:: Decker, Hallman, Barber & Briggs  
Street of mailing address:: 260 Peachtree Street, N.W.  
City of mailing address:: Atlanta  
State or Province of mailing address:: GA  
Postal or Zip Code of mailing address:: 30003  
Telephone:: (404) 522-1500  
Fax:: (404) 577-9149

### **Representative Information**

Representative Designation::	Registration number::	Name::
Primary	28197	Eduardo M. Carreras, Esq.

### **Assignee Information**

**Assignee name::** MAPEI Corporation  
**Street of mailing address::** 1144 East Newport Drive  
**City of mailing address::** Deerfield Beach  
**State or Province of mailing address::** FL  
**Country of mailing address::** USA  
**Postal or Zip Code of mailing address::** 33442